STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) _Da	n Kaman			
II. Name of lobbyist's parti	nership, firm or corporation, if any:			
CoreCivic				
(Name of pa	rtnership, firm or corporation)			
Business Address: (Street)	Nashville, TN 37215 (Town/City)	(State)	(Zip Code)	
(615)263-3056 (Telephone)	() 615-565-9906 (Fax)	e-mail_daniel.kaman@corecivic.com		
	(Choose one – file separate reports for tions which are not attributable to any		y file a separate report for	
☐ X All reportable transactio	ns occurring in the months prior to the re	porting date relative to the	e following client:	
CoreCivic				
OR (Full	Name of Client as it appears on the Lobbyist	Registration Form)		
	s by the lobbyist (including the lobbyist's ent.	family), or the lobbying	firm listed below which are	
IV. Date of Report Reports cover:	activ	October 25, 2017 $X\square$ activity from 7/1/17 to 9/30/17		
	es received and no reportable trans the just this form and submit it to the Secr			
VI. Check if additional repo	orts are attached:			
_	or made expenditures, you must lile Ad	dendum A- Fees and Exp	penses	
☐ If you have paid an hono Expense Reimbursement	rarium or reimbursed expenses, you must	t file Addendum B - Rep	ort of Honorariums or	
☐ If you, your firm, or your	family has made political contributions,	you must file Addendun	n C- Political Contributions	
Sworn Statement/Affirmati I have read RSA 15, RSA 15 and complete to the best of m	-B, RSA 14-C and RSA 664 and hereby s	swear or affirm that the fo	regoing information is true	
Jem Canav	1 py Au	10-20-2017		
(Signature of lobbyist)	0 //	(Date	•	
Dan Kaman			RECEIVED	
(Print Name of lobbyist)				

OCT 2 3 2017

NEW HAMPSHIRE DEPARTMENT OF STATE